

Solicitation Number:

APP111513

Notice Type:

Presolicitation

Synopsis:

Added: Jun 20, 2011 7:29 am Modified: Jun 22, 2011 3:26 pm

Date: June 17, 2011

Subject: Solicitation Number APP111513, Hospital Engagement Contractor in Support of Partnership for Patients.

CMS intends to award multiple contracts for the subject need by September 30, 2011. CMS intends to make Firm Fixed Price awards however the contracting officer reserves the right to award any other type of contract type deemed necessary.

Please be advised that this Pre-Solicitation does not commit the Government to pay any cost for the preparation and submission of a quotation. In addition the contracting officer is the only individual who can legally commit the Government to the expenditure of public funds in connection with this procurement. CMS anticipates making awards without discussions. CMS Industry Day:

CMS has planned an Industry Day related to this effort. Please pay close attention to the following information;

Date: July 6, 2011

Time: 1:00pm - 4:00pm EST

Website: <https://webinar.cms.hhs.gov/pfp-engagement/>

Telephone number: (877)-267-1577

Participant Code: 5045

It is recommended that if you have never attended a Connect Pro meeting before, to test your connection and system requirements:

https://webinar.cms.hhs.gov/common/help/en/support/meeting_test.htm

When logging in to the webinar site as a guest, identify the organization and primary representative speaking on behalf of the organization. (i.e. Maryland Safe Hospitals Assoc - John Doe). The meeting room will be open thirty (30) minutes prior to the scheduled meeting time. It is strongly encouraged that you log-in during this period to ensure your acceptance into the online forum.

There will also be 200 audio conference lines available for those unable to utilize the on-line forum. Access to the audio conference will be on a first come, first serve basis.

Please be advised: CMS does not expect any organizations to be present at CMS headquarters for this Industry Day.

Background:

The Centers for Medicare & Medicaid Services (CMS) will implement the Partnership for Patients (PFP). The PFP is a priority project designed to reduce inpatient harm by 40% and readmissions by 20% over a 3 year period. The PFP has identified ten areas of focus. Although the PFP will not limit its work to these areas and will pursue the reduction of all-cause harm, these focus areas are those for which content will be developed and learning activities conducted and made available to hospitals participating in the partnership. The Hospital Engagement Contractor (HEC) may address additional forms of harm and complications beyond this core set.

- Adverse drug events (ADE)
- Catheter-associated urinary tract infections (CAUTI)
- Central line-associated blood stream infections (CLABSI)
- Injuries from falls and immobility
- Obstetrical adverse events
- Pressure ulcers
- Surgical site infections
- Venous thromboembolism (VTE)
- Ventilator-associated pneumonia (VAP)
- Preventable readmissions

Through coordinated efforts with industry and experts in the field of medicine, CMS has an interest in testing models such as large improvement networks aimed at rapidly studying, and identifying alternative methodologies and care models for bringing about rapid change and improvements in patient care. In support of the PFP, CMS will engage the hospital, provider and broader care-giver communities to quickly implement well-tested and measured best practices; the end result of the overall initiative is the anticipated reduction in hospital-based harm and preventable readmissions for our beneficiary population. Provided in Section J, Attachment 1 is a document outlining the overall goals of the PFP and the expected impact on the Medicare and Medicaid populations as well as the exponential impact on the broader population. Further information on other work in the PFP arena and other contracts in support of PFP may be found at J, Attachment 2.

Purpose:

Under the terms and conditions of this contract, the HECs will design and conduct various types of training events and sessions for hospitals. The training should be rooted in establishing and measuring/evaluating ongoing improvement projects in each participating hospital (or facility). All education activities are designed to achieve reductions in the ten core events and producing measurable improvements in quality measures associated with the ten core events. The success of

the HEC will, in large part, be assessed through objective measurement of the incidence of the ten core events. The HECs will be required to coordinate their efforts with government and other contractor personnel involved in the PFP while performing tasks of this contract as defined in the requirements below. In order to successfully perform this contract, the HECs must host various training sessions for hospitals engaged in ongoing improvement projects. While it is anticipated that the HECs will engage in methods such as webinars, meetings and conferences to accomplish the work as defined in this contract, it must be noted that this is a performance-based contract; the expectation is that the contractors will specify in detail the methods they plan to use to meet the requirements as established by the Government.

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